Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No 1545-0047 Open to Public

Cepartment of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Inspection

A	For the 20	07 calendar year, or tax year beginning		and ending			
В	Check if applicable	Please use IRS			D	Employer ide	ntification number
	Address change	print or THE PHILANTHROPY ROL	JNDTABLE		ľ	13-294	13020
	Name change	type Number and street (or P.O. box if mail is i	not delivered to street address)		Room/suite E	Telephone nu	
	Initial return	Specific 1150 17TH STREET, N.	.W.		503	202-82	22-8333
	Termin- ation	Instruc- tions	1		<u> </u>	Accounting method	Cash X Accrual
<u>_</u>	Amende	MASHINGTON, DC 2003				Other (specify)	
	Application pending	<ul> <li>Section 501(c)(3) organizations and 4947(a) must attach a completed Schedule A (Form §</li> </ul>		ts Handl	are not applica	able to sectio	n 527 <u>org</u> anizations
		•	•	' '	this a group retu		
		WWW.PHILANTHROPYROUNDTA			"Yes," enter num		
		ion type (check only one) X 501(c) ( 3 ) (inse	(-/( / 6.	—— / If	e all affiliates inc "No," attach a lis	luded? N,	/A LYes LNo
		e I if the organization is not a 509(a)(3) suppo	* -	s   H(d) Ìs	this a separate r	eťurn filed by a	in or-
		e normally <b>not</b> more than \$25,000. A return is not req o file a return, be sure to file a complete return	uired, but if the organization		inization covered		ling? Yes X No N/A
	71100303 1	s nie a retern, be sare to me a complete retern			oup Exemption		n is <b>not</b> required to attach
1 (	Gross rec	eipts: Add lines 6b, 8b, 9b, and 10b to line 12	4,721,19		th. B (Form 990,	-	
		Revenue, Expenses, and Changes in			(, 0,, 0,00)	200 22, 0, 00	
	1	Contributions, gifts, grants, and similar amounts recei					
	a	Contributions to donor advised funds		1a			
	Ь	Direct public support (not included on line 1a)			,972,36	$\overline{2}$ .	
	c	Indirect public support (not included on line 1a)		1c			
	d	Government contributions (grants) (not included on li	ne 1a)	1 <u>d</u>			
~	е	Total (add lines 1a through 1d) (cash \$3 , 9	972,362. noncash\$	· 	)	1e	3,972,362.
2002	2	Program service revenue including government fees a	and contracts (from Part VII, line	e 93)		2	436,950.
	3	Membership dues and assessments				3	
<b>⇒</b> ≈	4	Interest on savings and temporary cash investments				4	121,277.
	5	Dividends and interest from securities	5	54,653.			
	-	Gross rents	-	6a			
		Less: rental expenses		<u>6</u> b	<del> </del>	-	
		Net rental income or (loss). Subtract line 6b from line	ба			6c	
SCANNED Revenue	7	Other investment income (describe  Gross amount from sales of assets other	(A) Securities	<del></del>	(B) Other .	) 7	· ·
		than inventory	96,314.	8a	(B) Other ,		
$ \bigcirc $		Less: cost or other basis and sales expenses	96,314.	8b	-	<b></b>	
(AS)		Gain or (loss) (attach schedule)	30/0221	8c			
		Net gain or (loss). Combine line 8c, columns (A) and (	(B)	STMT 2	-	8d	
		Special events and activities (attach schedule). If any		here 🕨 🔲			
	a	Gross revenue (not including \$	of contributions reported on line 1b)	9a			
	b	Less direct expenses other than fundraising expenses	s [	9 <u></u> b			
	C	Net income or (loss) from special events. Subtract line	e 9b from line 9a	1		9c	
	10 a	Gross sales of inventory, less returns and allowances	_	<u>10a</u>			
	b	Less; cost of goods sold	RECEN	10b			
		Gross profit or (loss) from sales of inventory (attach s	chedule). Subtract fine 100-from			10c	20 625
		Other revenue (from Part VII, line 103)		S		11	39,635. 4,624,877.
		Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1 Program services (from line 44, column (B))	Oc, and # MAY 2 1	RS-OSC		12	3,367,716.
es		Management and general (from line 44, column (C))				14	308,814.
Expenses		Fundraising (from line 44, column (D))	OGDEN			15	198,515.
χ̈́		Payments to affiliates (attach schedule)	L	<u>,                                     </u>		16	
		Total expenses. Add lines 16 and 44, column (A)				17	3,875,045.
	18	Excess or (deficit) for the year. Subtract line 17 from I	ine 12			18	749,832.
Net Assets	19	Net assets or fund balances at beginning of year (from	n line 73, column (A))			19	5,062,176.
A SS		Other changes in net assets or fund balances (attach $\epsilon$	•	EE STAT	EMENT 3	20	33,265.
_	21	Net assets or fund balances at end of year. Combine li				21	5,845,273.
7230	U 1 .	MA Cor Drivery Act and Denaminate Reduction Act	Notice and the concrete instri	uetione			Form <b>990</b> (2007)

Functional Expenses and (	ŤŤ		(B) Program	le trusts but optional for other	
6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	services	and general	(D) Fundraising
22a Grants paid from donor advised funds					
(attach schedule)					
(cash \$ 0 • noncash \$ 0	<b>1</b> 1				
If this amount includes foreign grants, check here	22a			GMA MPNATNYM F	
22b Other grants and allocations (attach schedule				STATEMENT 5	
(cash \$ 250000 noncash \$ 0	1	350 000	250 000		
If this amount includes foreign grants, check here	22b	250,000.	250,000.	-	
23 Specific assistance to individuals (attach	23				
schedule) 24 Benefits paid to or for members (attach	23			-	
schedule)	24				
25a Compensation of current officers, directors, key	27				
employees, etc. listed in Part V-A	25a	438,584.	321,636.	67,871.	49,077.
<b>b</b> Compensation of former officers, directors, key		200,0020	<u> </u>		
employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included					
above, to disqualified persons (as defined under					
section 4958(f)(1)) and persons described in					
section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not					
included on lines 25a, b, and c	26	985,232.	786,809.	111,853.	86,570.
27 Pension plan contributions not included on					
lines 25a, b, and c	27	30,098.	26,132.	2,071.	1,895.
28 Employee benefits not included on lines					
25a - 27	28	127,260.	99,654.		11,815.
29 Payroll taxes	29	88,977.	69,453.	11,119.	8,405.
30 Professional fundraising fees	30				
31 Accounting fees	31	14,277.	13,371.		46.
32 Legal fees	32	27,394.	25,655.	1,650.	89.
33 Supplies	33	05 124	00 505	1 604	1 003
34 Telephone	34	25,134.	22,527.		1,003.
35 Postage and shipping	35	92,327.	83,383.		7,304.
36 Occupancy	36	111,131.	88,016.		8,890.
37 Equipment rental and maintenance	37	49,173.	40,305.	<del> </del>	3,411.
38 Printing and publications	38	134,231.	124,459.		7,553.
39 Travel	39	231,030.	225,824.		12.
40 Conferences, conventions, and meetings	40	453,233.	453,233.		
41 Interest	41	32,386.	25,649.	4,146.	2,591.
<ul><li>42 Depreciation, depletion, etc (attach schedule)</li><li>43 Other expenses not covered above (itemize)</li></ul>	42	32,300.	43,043.	4,140.	
·	43a				
a	43b				
b	43c				
c	43d				
e	43e				
f	43f	* * * * * * * * * * * * * * * * * * * *			
g SEE STATEMENT 4	43g	784,578.	711,610.	63,114.	9,854.
44 Total functional expenses Add lines 22a through	,,,,,				
43g (Organizations completing columns (B)-(D),					
carry these totals to lines 13-15)	44	3,875,045.	3,367,716.	308,814.	198,515
Joint Costs. Check ▶ ☐ if you are following					
Are any joint costs from a combined educational campa			orted in (B) Program serv	vices? ►	Yes X No
If "Yes," enter (1) the aggregate amount of these joint co	-				N/A;
(iii) the amount allocated to Management and general S			v) the amount allocated t	———	N/A
723011 12-27-07					Form <b>990</b> (2007)

Förm 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE STATEMENT 6	Program Service
All organizations must describe their exempt purpose achievements in a clear and concise manner. Stat clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allogations.	3) and (4) 4947(a)(1) trusts; but
a ANNUAL MEETING - TO FOSTER EXCELLENCE IN PHILANTHE THROUGH AN ANNUAL MEETING OF FOUNDATION EXECUTIVES INDIVIDUAL PHILANTHROPISTS, AND DONOR ADVISORS IN SHARE IDEAS, STRATEGIES, AND BEST PRACTICES.	4
(Grants and allocations \$ ) If this amount includes foreign grants, or b BREAKTHROUGH GROUP MEETINGS AND SERVICES - TO PROVE FORUM FOR DONORS TO DISCUSS BREAKTHROUGH INITIATIVE AND HIGHER EDUCATION, CONSERVATION, NATIONAL SECUR HELPING PEOPLE TO HELP THEMSELVES IN SOCIAL ISSUES OTHER PROGRAMMATIC ISSUES.	IDE A ES IN K-12 ITY,
(Grants and allocations \$ ) If this amount includes foreign grants, c  C ALLIANCE FOR CHARITABLE REFORM - TO PROTECT PHILAN  FREEDOM AND PROMOTE COMMON-SENSE REFORM OF THE PHI  SECTOR.	THROPIC
(Grants and allocations \$ ) If this amount includes foreign grants, of PHILANTHROPY - TO PRODUCE A MAGAZINE WHICH FOCUSES STRATEGIC QUESTIONS OF PHILANTHROPIC GIVING AND IS DISTRIBUTED TO MORE THAN 3,000 INDIVIDUALS.	ON BROAD
(Grants and allocations \$ ) If this amount includes foreign grants, coefficient of Program Service (State School equal line 44, column (B), Program services)	

Form **990** (2007)

	990 (200				<u>13-2943</u>	020		age 6
	t V-A	Current Officers, Directors, Trustees, and Ke	<del> </del>				Yes	No
75 a	Enter the	e total number of officers, directors, and trustees permitted t	o vote on organization bus	siness at board				
	meeting	S		<b>&gt;</b>	7			
h	Are anv	officers, directors, trustees, or key employees listed in Form	990, Part V-A, or highest of	compensated emol	lovees			
-		Schedule A, Part I, or highest compensated professional and						
	Part II-A	or II B, related to each other through family or business relat	ionships? If "Yes," attach	a statement that i	dentifies			
	the indiv	riduals and explains the relationship(s)				75b		Х
r	Do any o	officers, directors, trustees, or key employees listed in Form 9	990 Part V.A. or highest o	omnensated emole	OVAAS			
·		Schedule A, Part I, or highest compensated professional and	<del>-</del>		•			
		or II-B, receive compensation from any other organizations,	•					
	organiza	ition? See the instructions for the definition of "related organ	ization "			75c		X
	If "Yes,"	attach a statement that includes the information described	in the instructions					
d	Does the	e organization have a written conflict of interest policy?				75d		X
	t V-B	Former Officers, Directors, Trustees, and Ke						
		Benefits (If any former officer, director, trustee, or key en						
		the year, list that person below and enter the amount of cor	npensation or other benef					
		(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid,	(D) Contributions employee benefi		E) Expe ccount :	
		NONE	(b) cours and navarious	enter -0-)	plans & deferred compensation pla		er allow	
			-		·			
					··			
						+		
	<del>-</del>							
						+	_	
						-		
					<del></del>	+		
						Ì		
Pa	rt VI (	Other Information (See the instructions )					Vaa	No
		· · · · · · · · · · · · · · · · · · ·		<del></del>			Yes	NO
76		organization make a change in its activities or methods of co	nducting activities? If "Yes	s," attach a detaile	d			~~
		nt of each change	_	_		76_		<u> X</u>
77		ly changes made in the organizing or governing documents by	out not reported to the IRS	37		77	$\vdash$	<u>X</u> _
		attach a conformed copy of the changes						
78 a		organization have unrelated business gross income of \$1,00	0 or more during the year	covered by this ret		78a		<u> </u>
b	If "Yes,"	has it filed a tax return on Form 990-T for this year?			N/A	78b		
79	Was the	ere a liquidation, dissolution, termination, or substantial contr	action during the year? If '	'Yes," attach a sta	tement	79	ļ	X
80 a	is the o	ganization related (other than by association with a statewid	e or nationwide organizati	on) through comm	on			
	membei	ship, governing bodies, trustees, officers, etc., to any other	exempt or nonexempt orga	anization?		80a		X
b	If "Yes,"	enter the name of the organization N/A						
			and check whether it is	exempt or	nonexempt			
81 a	Enter di	rect and indirect political expenditures (See line 81 instruction	-	81a	0.			
_ b		organization file Form 1120-POL for this year?				81b		X
							agn	20071

_	_	990 (2007) THE PHILANTHROPY ROUNDTABLE 13-2943	020		age 7
P	ar	t VI Other Information (continued)			No
82	a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially			
		less than fair rental value?	82a		X
	b	If "Yes," you may indicate the value of these items here. Do not include this		-	
		amount as revenue in Part I or as an expense in Part II			İ
		(See instructions in Part III ) 82b N/A	ļ		
83	a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
	b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84	a	Did the organization solicit any contributions or gifts that were not tax deductible? N/A	84a		
	b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
		tax deductible? N/A	84b		
85	a	501(c)(4), (5), or (6) Were substantially all dues nondeductible by members? N/A	85a		
	b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
		If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a			
		waiver for proxy tax owed for the prior year			
	С	Dues, assessments, and similar amounts from members 85c N/A			
	d	Section 162(e) lobbying and political expenditures 85d N/A			
	е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
	f	Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f N/A			
	_	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		<u> </u>
		If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f			
		to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the		٠	
		following tax year? N/A	85h		<u> </u>
86		501(c)(7) organizations Enter a Initiation fees and capital contributions included on			
		line 12 86a N/A			
	b	Gross receipts, included on line 12, for public use of club facilities  86b N/A			
87		501(c)(12) organizations Enter a Gross income from members or shareholders  87a N/A			
	b	Gross income from other sources (Do not net amounts due or paid to other sources			ĺ
00		against amounts due or received from them)  876 N/A	1		l
00	a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			
		or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88a		x
	h	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of	UUA		
	J	section 512(b)(13)? If "Yes," complete Part XI	88b		$ _{\mathbf{x}}$
89	a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under	000		
•	•	section 4911 ► 0 . ; section 4912 ► 0 .			1
	b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			l
	_	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			İ
		If "Yes," attach a statement explaining each transaction	89b		_ x_
	C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			
		sections 4912, 4955, and 4958	i		
	d	Enter Amount of tax on line 89c, above, reimbursed by the organization			
	е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		<u>x</u>
	f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		<u> </u>
	g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization,			ŀ
		or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? $\mathrm{N/A}$	89g		<u> </u>
90	a	List the states with which a copy of this return is filed ▶DC			
		Number of employees employed in the pay period that includes March 12, 2007			14
91	a	The books are in care of ► THE ORGANIZATION Telephone no. ► 202-82			
		Located at ► 1150 17TH STREET, N.W., WASHINGTON, DC ZIP+4 ► 2	003		- A1 -
	b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		res	No
		a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		X
		If "Yes," enter the name of the foreign country   N/A			1
		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			1
	_	and Financial Accounts	<u> </u>	000	(000=
			rorm	33U	(2007)

Form 990 (2007) THE PHILANT	HROPY RO	OUNDTABLE		13-2	2943020 Page 8
Part VI Other Information (continued)					Yes No
• c At any time during the calendar year, did the organization			f the Unite	d States?	91c X
If "Yes," enter the name of the foreign country		N/A	_		
92 Section 4947(a)(1) nonexempt charitable trusts fil	-		Check here	i i	. ▶ ∟
and enter the amount of tax-exempt interest rece				▶ 92	<u> </u>
Part VII   Analysis of Income-Producing			1		
Note: Enter gross amounts unless otherwise	(A)	ed business income	<del></del>	y section 512, 513, or 514	(E)
ındıcated	Business	(B) Amount	(C) Exclu-	(D) Amount	Related or exempt
93 Program service revenue	code	Amount	sion	Amount	function income
a CONFERENCE					436,150.
b PUBLICATION					800.
C		<u> </u>			
d		<u> </u>			
e		<u> </u>			
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			18	121,277.	
96 Dividends and interest from securities			14	54,653.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets					
other than inventory					
101 Net income or (loss) from special events					<del></del>
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					<del></del>
a MISCELLANEOUS					39,635.
b		<del> · · · · · · · · · · · · · · · · ·</del>			<u> </u>
	1 1				
c	1 1				
0					
104 Subtotal (add columns (B), (D), and (E))		0		175,930.	476,585.
105 Total (add line 104, columns (B), (D), and (E))		<u> </u>	• 1 1	1/3,330.	652,515.
Note: Line 105 plus line 1e, Part I, should equal the am	ount on line 13	Part I		_	032,313.
Part VIII Relationship of Activities to the		•	nt Purno	SAS (See the instruction	
	· · · · · · · ·			··-·· · · · · · · · · · · · · · · · · ·	- · · · · · · · · · · · · · · · · · · ·
Line No. Explain how each activity for which income is rejected exempt purposes (other than by providing funds			u importanti	y to the accomplishment of	the organization's
SEE STATEMENT 12					
DEE STATEMENT 12					
Part IX Information Regarding Taxable	Subsidiar	ies and Disregard	led Entit	ies (See the instruction	9)
(A) (B)		(C)		(D)	(E)
Name, address, and EIN of corporation, partnership, or disregarded entity ownership inter		Nature of activities		Total income	End-of-year
partitership, or disregarded entity Ownership lines					assets
NT / 7	%				
N/A	%			-	
	%	· · · · · · · · · · · · · · · · · · ·			
Part X Information Regarding Transfe		ted with Dersons	   Ropofia	Contracts (0#	unata intiga a 1
				•	
(a) Did the organization, during the year, receive any funds			•	penetit contract?	Yes X No
(b) Did the organization, during the year, pay premiums, di	•		contract?		Yes X No
Note: If "Yes" to (b), file Form 8870 and Form 4720 (	see instruction	s)		<del> </del>	
					Form <b>990</b> (2007)

723163 12-27-07

951-9090

Preparer's SSN or PTIN (See Gen Inst X)

Paid

Preparer's

Use Only

SUITE 650 NORTH

ROSENBERG & FREEDMAN

MARYLAND 20814-2930

Preparer's

signature

Firm's name (or

self-employed)

address, and

GELMAN,

4550 MONTGOMERY AVE.,

Check if

Self-employed >

EIN ▶

Phone no. ► (301)

## **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)** 

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

Name of the organization	·		Employer identi	fication number
THE PHILANTHROPY ROUNDTA	BLE		13 2943	020
Part I Compensation of the Five Highest Paid Em (See page 1 of the instructions List each one. If there are none,	• •	n Officers, Dire	ectors, and T	rustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hour per week devoted to position	(c) Compensation	(d) Contributions t employee benefit plans & deferred compensation	account and other
STEPHANIE SAROKI ALL IN C/O THE ORGANIZATION'S ADDRES		PROGRAMS 96,000	. 36,918	
MARK SMITH	DIR OF NAT'L			
JOHN_AGRESTO	DIR OF HIGHE			•
DOROTHY MARTINEZ	DIR OF REGIC			
KIRK_OBERFELD	VP OF COMMUN			
Total number of other employees paid over \$50,000	4	73,210	• <u>  13,407</u>	•1
Part II-A Compensation of the Five Highest Paid Ind (See page 2 of the instructions List each one (whether individual	ependent Contract		sional Servic	es
(a) Name and address of each independent contractor paid more t	<u>`</u>	(b) Type of	service	(c) Compensation
VENN STRATEGIES 805 15TH ST NW SUITE 650, WASHINGTON	, DC 20005	SELF-DEFEI LOBBYING		270,000.
FOLEY & LARDNER 3000 K STREET NW SUITE 500, WASHINGT	ON, DC 20007	SELF-DEFEI LOBBYING	NSE	55,000.
Table where it shows a second constant				
Total number of others receiving over \$50,000 for professional services	o			
Part II-B Compensation of the Five Highest Paid Inc (List each contractor who performed services other than profess firms If there are none, enter "None." See page 2 of the instruction	sional services, whether indiv		Services	
(a) Name and address of each independent contractor paid more to	han \$50,000	(b) Type of	service	(c) Compensation
NONE				
Total number of other contractors receiving over \$50,000 for other services	0			

Schedule A (Form 990 or 990-EZ) 2007

N/A N/A

d Enter the total number of donor advised funds owned at the end of the tax year

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year

g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year

f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts

Part	IV	Reason for Non-Private Foundation S	Status (See pages 4 t	through 8 of the instructio	ns.)		
I certify t	that th	ne organization is not a private foundation because it is: (F	Please check only ONE a	applicable box.)			
5 [		A church, convention of churches, or association of ch					
6 [		A school. Section 170(b)(1)(A)(ii). (Also complete Part		,			
7 [		A hospital or a cooperative hospital service organization	•	III).			
8 [		A federal, state, or local government or governmental u					
9 [		A medical research organization operated in conjunctio			he hospital's	s name, city,	
		and state	·		•		
10 [		An organization operated for the benefit of a college or	university owned or ope	rated by a governmental i	ınıt. Section	170(b)(1)(A)(ıv	)
		(Also complete the Support Schedule in Part IV-A.)		, ,			,
11a [	X	An organization that normally receives a substantial pa	rt of its support from a	governmental unit or from	the general	public.	
		Section 170(b)(1)(A)(vi). (Also complete the Support	Schedule in Part IV-A.)		_		
11b [		A community trust. Section 170(b)(1)(A)(vi). (Also con		dule in Part IV-A.)			
12 [		An organization that normally receives: (1) more than 3			rship fees, a	nd gross	
		receipts from activities related to its charitable, etc., fun	ictions - subject to certa	in exceptions, and (2) no	more than 3	3 1/3% of	
		its support from gross investment income and unrelate				sses acquired	
		by the organization after June 30, 1975. See section 50	U9(a)(2). (Also complet	e the <b>Support Schedule</b> ir	Part IV-A.)		
13		An organization that is not controlled by any disqualifie	d persons (other than fo	oundation managers) and	otherwise me	ets the require	ments of section
		509(a)(3). Check the box that describes the type of sup	porting organization				
		Type I Type II	Type III-Fı	inctionally Integrated		Type III-0	)ther
		Provide the following information ab	out the supported orga	nizations. (See page 8 of	the instruction	ons.)	
		(a)	(b)	(c)	(d	)	(e)
		Name(s) of supported organization(s)	Employer	Type of organization		pported	Amount of
			identification number (EIN)	(described in lines 5 through 12 above		on listed in porting	support
				or IRC section)	organi	zation's	
					governing	documents?	
					Yes	No	
							<del>_</del> ·
						] ]	
Total						<b>▶</b>	
Total		An organization organized and operated to test for pub				<b>&gt;</b>	<u> </u>

Schedule A (Form 990 or 990-EZ) 2007

Pa	rt IV-A Support Schedule (Co	omplete only if you che worksheet in the inst	ecked a box on line 10	, 11, or 12) Use cash	method of accounting	ng.
	ndar year (or fiscal year	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	, , , , , , , , , , , , , , , , , , , ,		1,771,463.		
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	341,228.	405,158.	367,506.	354,082.	1,467,974.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	76,001.	31,379.	23,434.	11,586.	142,400.
19	Net income from unrelated business					
	activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule Do not include gain or (loss) from sale of capital assets	19,026.	<b>)</b>	SEE STATEME 10,523.	1	41,095.
23	Total of lines 15 through 22	5,872,863.	3,182,342.	2,172,926.	3,084,600.	14,312,731.
24	Line 23 minus line 17	5,531,635.		1,805,420.		12,844,757.
25	Enter 1% of line 23	58,729.	31,823.	21,729.	30,846.	
26	Organizations described on lines 10	<b>0 or 11</b> a Enter 2% of	amount in column (e), lin	e 24	► 26a	256,895.
b	· · · · · · · · · · · · · · · · · · ·		• •	•		
	unit or publicly supported organization	•	*	ded the amount shown in	ı lıne 26a.	
	Do not file this list with your return				▶ 26b	3,084,525.
C	Total support for section 509(a)(1) to				<b>▶</b> 26c	12,844,757.
d	Add: Amounts from column (e) for li		<b>42,400.</b> 19	2 224 52		2 2 2 2 2 2 2
			<b>41,095.</b> 26b	3,084,52		3,268,020.
e	Public support (line 26c minus line 2	•			26e	9,576,737.
	Public support percentage (line 26)				▶ 26f	74.5576%
27	Organizations described on line 12 records to show the name of, and to					•
	•	N/A	acii yeai ii oiii, eacii uisq	uaimeu person <b>Do not n</b>	ie uns ust with your retu	HI LINE THE SUIT OF
	(2006)	(2005)	(2	004)	(2003)	
b				•	, ,	to show the name of.
_	and amount received for each year, t		•			
	described in lines 5 through 11b, as the larger amount described in (1) o (2006)	well as individuals ) Do n	ot file this list with your ese differences (the exces	return After computing t	he difference between the	
C	` '	nes: 15 _		16		1
	17	20		21	<u>27c</u>	N/A
d			nd line 27b total	<del></del>	<b>&gt;</b> 27d	N/A
е	Public support (line 27c total minus		00 1	►  l	► 27e	N/A
f	Total support for section 509(a)(2) t				N/A	NT / N A
9					► 27g ► 27h	N/A % N/A %
	Investment income percentage (lin Unusual Grants For an organization de					
			and a countried dilly dille	Juan granto during 2000	Jugni Euvo, biobaio a	

show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return Do not include these grants in line 15. NONE Schedule A (Form 990 or 990-EZ) 2007

723131 12-27-07

Private School Questionnaire (See page 9 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	_   _   _		
32 a	Does the organization maintain the following  Records indicating the racial composition of the student body, faculty, and administrative staff?	_   32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to.	-		
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		
a	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
1	Use of facilities?	33f		
g	Athletic programs?  Other putropurpouler petrution?	33g		
h	Other extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)	33h		
		_		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	- 34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50,			
	1975-2 C.B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Schedule A (Form 990 or 990-EZ) 2007

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

	(10 be completed ONLY b	y an eligible organization that filed Form 5768)	_		
Che	eck 🕨 a 🔃 if the organization belon	igs to an affiliated group. Check 🕨 b	If you chec	ked "a" and "limited contr	of provisions apply.
		n Lobbying Expenditures itures' means amounts paid or incurred )		(a) Affiliated group totals	(b) To be completed for all electing organizations
36 37 38	Total lobbying expenditures to influence Total lobbying expenditures to influence Total lobbying expenditures (add lines 3	a legislative body (direct lobbying)	36 37 38	N/A	0. 0.
39 40	Other exempt purpose expenditures Total exempt purpose expenditures (add	•	39 40		3,848,795. 3,848,795.
41	Lobbying nontaxable amount. Enter the If the amount on line 40 is - Not over \$500,000	amount from the following table -  The lobbying nontaxable amount is -  20% of the amount on line 40			
	Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$17,000,000	\$100,000 plus 15% of the excess over \$500 000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000	41		342,440.
42 43	Over \$17,000,000 Grassroots nontaxable amount (enter 2) Subtract line 42 from line 36. Enter -0-	•	42		85,610. 0.
44	Subtract line 41 from line 38. Enter -0- i	f line 41 is more than line 38	44	·	0.
	Caution: If there is an amount on ei	ther line 43 or line 44, you must file Form 4720			

### 4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

		Lobbying Exper	nditures During 4-Year Aver	raging Period	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2006	(c) 2005	( <b>d</b> ) 2004	(e) Total
45 Lobbying nontaxable amount	342,440.	312,381.	302,842.	0.	957,663
46 Lobbying ceiling amount (150% of line 45(e))					1,436,495
47 Total lobbying expenditures		0.	86,095.	0.	86,095
48 Grassroots nontaxable amount	85,610.	78,095.	75,711.	0.	239,416
49 Grassroots ceiling amount (150% of line 48(e))					359,124
50 Grassroots lobbying expenditures	0.	0.	86,095.	0.	86,095

Part VI-B | Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Yes	No	Amount
-		
	ļ. <u> </u>	
		0

12-27-07

Schedule A (Form 990 or 990-EZ) 2007

		7 THE PHILANTHROP			<u>3-2943020 Page 7</u>
Part				l Relationships With Non	charitable
• -		zations (See page 14 of the instr		<del></del>	<del>,</del> ,
		lirectly or indirectly engage in any of			
	· · ·	section 501(c)(3) organizations) or ii	= :	litical organizations?	Yes No
	i) Cash	ganization to a noncharitable exempt	organization of		Yes No 51a(ı) X
	ii) Other assets				a(ii) X
	ther transactions:				<u> </u>
		ets with a noncharitable exempt orga	nization		b(ı) X
		noncharitable exempt organization	-		b(II) X
(1)	iı) Rental of facilities, equipme	ent, or other assets			b(iii) X
(i	v) Reimbursement arrangeme	ents			b(iv) X
(	v) Loans or loan guarantees				b(v) X
	·	membership or fundraising solicitat			b(vi) X
	•	mailing lists, other assets, or paid e			c X
			, ,	lways show the fair market value of the	ne
		s given by the reporting organization. nent, show in column (d) the value o	=	·	AT / B
	(b)		i ille guous, other assets, or	services received.	N/A
(a) Line no.		(c) Name of noncharitable ex	empt organization	Description of transfers, transaction	ns, and sharing arrangements
			··· ···· ·· ··· ··· ··· ··· ···		<del></del>
			************		· · · · · · · · · · · · · · · · · · ·
			<del></del>		· · · · · · · · · · · · · · · · · · ·
					· <del>=</del>
			· · · · · · · · · · · · · · · · · · ·		, , , , , , , , , , , , , , , , , , ,
<b>52 a</b> ls	the organization directly or in	directly affiliated with, or related to, o	one or more tax-exempt orga	anizations described in section 501(c	,
	ode (other than section 501(c)	, , , ,		J	Yes X No
<u>b</u> 11	"Yes," complete the following:			<u>r</u>	
	(a Name of or	) ganization	(b) Type of organization	(c) Description of re	elationshin
			, , po or or garrianion		
	<del></del>				
				,	
	<del></del>	······································			<del> </del>
	···				
	<del></del>				

# FORM 990 PAGE 2

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	MANAGEMENT AND GENERAL FURNITURE AND EQUIPMENT	VARIES	SL	5.00	16	117,507.			117,507.	78,067.		17,820.
2	LEASEHOLD IMPROVEMENTS	VARIES	SL	5.00	16	72,830.			72,830.	14,556.		14,566.
	* 990 PAGE 2 TOTAL MANAGEMENT AND GENERAL * GRAND TOTAL 990 PAGE					190,337.		0.	190,337.	92,623.	0.	32,386.
	2 DEPR					190,337.		0.	190,337.	92,623.	0.	32,386.
						:						
									:			

FOOTNOTES

STATEMENT

FORM 990, SCH. A, PART VI-A:

IN 2006, PROVIDED A \$350,000 GRANT AND \$1,400,000 PLEDGE TO ADMINISTER THE WILLIAM E. SIMON PRIZE FOR PHILANTHROPIC LEADERSHIP OVER A FIVE-YEAR PERIOD. IN 2007, THE ROUNDTABLE RECEIVED \$350,000 FOR THE SIMON PRIZE, LEAVING \$1,050,000 FOR THE AMOUNT PLEDGED. ANNUALLY, THE ROUNDTABLE WILL EXPEND \$100,000 IN COSTS TO MANAGE THE PRIZE, AND THE PRIZE RECIPIENT, A NOTEWORTHY PHILANTHROPIC LEADER, WILL DESIGNATE \$250,000 TO A CHARITY OF HIS OF HER CHOICE. THIS CHARITY WILL NOT BE AFFILIATED IN ANY WAY WITH THE ROUNDTABLE'S FINANCIAL OR MANAGERIAL OPERATIONS.

FORM 990 GAIN (LOSS)	FROM NON-PUBL	ICLY TRADED	SECURIT	IES	STATEMENT	2
DESCRIPTION			DATE SOLD		ETHOD QUIRED	
SALES OF INVESTMENTS				PUF	RCHASED	
NAME OF BUYER	GRC SALES		T OR BASIS	EXPENSE OF SALE	NET GAI OR (LOS	
	96	,314. 9	6,314.	0.	•	0.
TOTAL TO FM 990, PART I	, LN 8 96	,314. 9	6,314.	0.		0.
FORM 990 OTHER C	HANGES IN NET	ASSETS OR FU	ND BALA	ANCES	STATEMENT	3
DESCRIPTION					AMOUNT	
UNREALIZED GAIN ON INVE	STMENTS			_	33,2	65.
				_		
TOTAL TO FORM 990, PART	I, LINE 20			=	33,2	65.
		R EXPENSES			33,2 STATEMENT	
		(B)		C)		4
FORM 990	ОТНЕ		MANA	C) AGEMENT GENERAL	STATEMENT	4
FORM 990  DESCRIPTION  BANK CHARGES SUBSCRIPTIONS PRODUCTION	OTHE (A)	(B) PROGRAM	MANA AND •	GEMENT	STATEMENT (D) FUNDRAISI	4 ING
FORM 990  DESCRIPTION  BANK CHARGES SUBSCRIPTIONS PRODUCTION HONORARIA INSURANCE AUTHOR FEES PROFESSIONAL FEES	OTHE  (A)  TOTAL  13,695. 10,199. 53,241. 24,600. 20,802. 108,486. 461,977.	(B) PROGRAM SERVICES 3,838 9,925 52,686	MANA AND	9,857. 237.	STATEMENT (D) FUNDRAISI	37.
FORM 990  DESCRIPTION  BANK CHARGES SUBSCRIPTIONS PRODUCTION HONORARIA INSURANCE AUTHOR FEES PROFESSIONAL FEES SEMINARS/TRAINING MISCELLANEOUS	OTHE  (A)  TOTAL  13,695. 10,199. 53,241. 24,600. 20,802. 108,486. 461,977. 0. 2,597.	(B) PROGRAM SERVICES  3,838 9,925 52,686 24,600  108,486	MANA AND	9,857. 237. 65.	STATEMENT (D) FUNDRAISI	37.
FORM 990  DESCRIPTION  BANK CHARGES SUBSCRIPTIONS PRODUCTION HONORARIA INSURANCE AUTHOR FEES PROFESSIONAL FEES SEMINARS/TRAINING MISCELLANEOUS TEMPORARY HELP OFFICE EXPENSES TAXES	OTHE  (A)  TOTAL  13,695. 10,199. 53,241. 24,600. 20,802. 108,486. 461,977. 0. 2,597. 0. 35,351. 995.	(B) PROGRAM SERVICES  3,838 9,925 52,686 24,600  108,486 432,654  1,483  30,790 786	MANA AND	9,857. 237. 65. 20,802.	STATEMENT (D) FUNDRAISI	37. 190.
TOTAL TO FORM 990, PART  FORM 990  DESCRIPTION  BANK CHARGES SUBSCRIPTIONS PRODUCTION HONORARIA INSURANCE AUTHOR FEES PROFESSIONAL FEES SEMINARS/TRAINING MISCELLANEOUS TEMPORARY HELP OFFICE EXPENSES TAXES MEMBERSHIP DUES INTERN STIPENDS	(A) TOTAL  13,695. 10,199. 53,241. 24,600. 20,802. 108,486. 461,977. 0. 2,597. 0. 35,351.	(B) PROGRAM SERVICES  3,838 9,925 52,686 24,600  108,486 432,654  1,483  30,790	MANA AND	9,857. 237. 65. 20,802. 27,827. 1,056. 3,141.	STATEMENT (D) FUNDRAISI 1,4	4

FORM 990	CASH GRANTS AND ALLOCATIONS TO OTHERS	STA	TEMENT	
CLASS OF ACTIVIT	TY/DONEE'S NAME AND ADDRESS		AMOUNT	
SIMON PRIZE AWAI HOLY SPIRIT PREI 4820 LONG ISLANI ATLANTA, GA 3034	PARATORY ACADEMY O DRIVE		125,00	00.
SIMON PRIZE AWAI FEDERALIST SOCII 1015 18TH STREET WASHINGTON, DC 2	TY FOR LAW		125,00	00.
TOTAL INCLUDED (	ON FORM 990, PART II, LINE 22B		250,00	00.
FORM 990 STAT	PEMENT OF ORGANIZATION'S PRIMARY EXEMI PART III	PT PURPOSE STA	TEMENT	ε
EXPLANATION				
HELP DONORS ACH	ENCE IN PHILANTHROPY, TO PROTECT PHILEVE THEIR PHILANTHROPIC INTENT AND TO INITY, AND PERSONAL RESPONSIBILITY IN	O HELP DONORS AD	VANCE	
FORM 990	OTHER PROGRAM SERVICES	STA	TEMENT	7
DESCRIPTION OF (	THER PROGRAM SERVICES	GRANTS AND ALLOCATIONS	EXPENSE	ES
OTHER PUBLICATION	DNS	0.	113,85	54.
MEMBER SERVICES		0.	291,92	22.

FORM 990 DEPRECIATION OF	ASSE	rs not 1	HELD FOR	INVESTMENT	STATEMENT	8
DESCRIPTION		COST OTHER		ACCUMULATED DEPRECIATION	BOOK VALU	E
FURNITURE AND EQUIPMENT LEASEHOLD IMPROVEMENTS	<del>-</del>		17,507. 72,830.	95,887. 29,122.	21,6 43,7	
TOTAL TO FORM 990, PART IV, L	N 57 =	1:	90,337.	125,009.	65,3	28.
FORM 990 O	THER S	SECURIT	IES		STATEMENT	9
SECURITY DESCRIPTION				COST/FMV	OTHER SECURITIE	s
EQUITIES				FMV	1,975,0	00.
TO FORM 990, LINE 54B, COL B					1,975,0	00.
FORM 990 NON-	GOVERI	NMENT S	ECURITIES	5	STATEMENT	10
SECURITY DESCRIPTION COST/FMV		PORATE OCKS	CORPOR <i>I</i> BONDS		TOTAL NON-GOV SECURITI	
MUTUAL FUNDS FMV	-			604,892	. 604,8	92.
TO FORM 990, LINE 54A, COL B				604,892	. 604,8	92.

	PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ADAM J. MEYERSON ALL IN C/O THE ORGANIZATION'S ADDRESS	PRESIDENT 40.00	200,391.	78,111.	0.
SHANNON TORONTO	COO 40.00	135,000.	25,082.	0.
DANIEL S. PETERS	CHAIRMAN 3.00	0.	0.	0.
HEATHER RICHARDSON HIGGINS	VICE CHAIRMAN 2.00	0.	0.	0.
KIMBERLY O. DENNIS	SECRETARY 1.00	0.	0.	0.
JOSEPH S. DOLAN	TREASURER 2.00	0.	0.	0.
MICHAEL W. GREBE	BOARD MEMBER	0.	0.	0.
JAMES PIERESON	BOARD MEMBER	0.	0.	0.
CHESTER E. FINN, JR.	BOARD MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PAR	Т V-A	335,391.	103193.	0.

FORM S	90 PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES	STATEMENT	12
LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES		
93A			
	RECEIVED FOR THREE-DAY ANNUAL MEETINGS. MEMBERS GATHERED '	TO DISCUSS	
	SOLUTIONS WITH FEATURED EXPERTS ON DEVELOPING OUTSTANDING	•	
	EDUCATION, NATIONAL SECURITY, HEALTH CARE, CONSERVATION A		E
	GRANT MAKING. SOME OF THIS REVENUE WAS RECEIVED FOR A ONE REGIONAL MEETING ON WATER CONSERVATION.	-DAY	
93B	REGIONAL MEETING ON WATER CONSERVATION.  REVENUE FROM PUBLICATIONS THAT PROVIDE INFORMATION RELATED	лит От О	
J J D	ORGANIZATION'S EXEMPT PURPOSE.	J 10 1112	
103A	MISCELLANEOUS REVENUE RECEIVED FROM ACTIVITIES RELATED TO	THE	
	ORGANIZATION'S EXEMPT PURPOSE.		
	FOOTNOTES	STATEMENT	13

FORM 990, SCH. A, PART VI-A LINE 37:

DURING 2007, THE PHILANTHROPY ROUNDTABLE INCURRED SELF-DEFENSE LOBBYING EXPENSES IN THE AMOUNT OF \$472,142. SELF-DEFENSE EXPENSES ARE NOT CONSIDERED LOBBYING EXPENDITURES. THEREFORE, NONE OF THIS AMOUNT IS REFLECTED ON SCHEDULE A, PART VI-A, LINE 37.

SCHEDULE A	OTHER INC		STATEMENT	14	
DESCRIPTION	2006 AMOUNT	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT	
MISCELLANEOUS REVENUE	19,026.	10,865.	10,523	. 6	81.
TOTAL TO SCHEDULE A, LINE 22	19,026.	10,865.	10,523	. 6	81.